BEFORE THE ARIZONA BOARD OF OSTEOPATHIC EXAMINERS

#### IN MEDICINE AND SURGERY

IN THE MATTER OF:

Case No.: DO-09-0195A

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GARY KNIGHTON, D.O. Holder of License No. 3116

FINDINGS OF FACT,

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CONCLUSIONS OF LAW, AND ORDER FOR DECREE OF CENSURE

For the practice of osteopathic medicine in the )

AND CONTINUING MEDICAL

**EDUCATION** 

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On October 27, 2009, the Arizona Board of Osteopathic Examiners in Medicine and Surgery ("Board") received a complaint against Gary Knighton, D.O. ("Respondent").

Respondent was notified of the complaint on November 9, 2009. On December 1, 2009, the Board received Respondent's response to the complaint.

On July 1, 2010, the Board noticed Respondent to appear at an Investigative Hearing of this matter on September 11, 2010, and provided Respondent with the investigative materials, pursuant to A.R.S. § 32-3206. Respondent received those on July 2, 1010, and on September 2, 2010, he informed the Board he would appear.

On September 11, 2010, the Board conducted the Investigative Hearing. Respondent appeared and was represented by counsel, Robert J. Milligan.

On October 14, 2010 the Board met to discuss the draft findings of fact, conclusions of law and the order for decree of censure and continuing medical education. Respondent appeared and was represented by counsel, Robert J. Milligan.

After hearing testimony and considering the documents and evidence submitted, the

Board voted to enter the following Findings of Fact and Conclusions of Law, and Order for

Decree of Censure and Continuing Medical Education.

# JURISDICTIONAL STATEMENTS

The Board is empowered, pursuant to A.R.S. § 32-1800 et seq., to regulate the
practice of osteopathic medicine in the State of Arizona, and the conduct of the persons licensed,

registered, or permitted to practice osteopathic medicine in the State of Arizona.

 Respondent is the holder of License No. 3116 issued by the Board for the practice of osteopathic medicine in the State of Arizona.

### FINDINGS OF FACT

- 1. Between July 15, 2008 and July 1 2009, Respondent saw patient P.B., then a 57 year old male, for weight loss program. Respondent performed an examination that was limited to blood pressure and pulse, heart and lungs sounds. Respondent did not perform a complete physical examination of P.B., nor was such an examination by a current primary care physician included in Respondent's records. Respondent did not record a medical or social history of P.B.
- 2. During 2008, Respondent saw P.B. monthly from July through December. On each visit, Respondent's examination was limited to taking P.B.'s weight, blood pressure and pulse. On each visit, P.B. was treated with an injection of vitamins, 1cc of B12 and 0.5 cc of B6. He was placed on a 1600 calorie diet and prescribed phentermine 30 mg #28, and 5-HTP. On October 2, 2008, diethylpropion 75mg was added to P.B.'s regimen. The medical record for each visit was on half of pre-printed form that holds the records of two visits.
- 3. On January 16, 2009, P.B. reported that his urine flow was decreased, which was recorded in the section of the form for "Any Side Effect / Complaint?" Respondent prescribed Flomax© 0.4 mg, #30 tablets with three refills. Respondent did not do any physical examination or order any laboratory work, but did recommend P.B. follow up with a urologist. Respondent's examination on that visit was limited to taking B.P.'s blood pressure.
- 4. After the January 16, 2009, Respondent saw P.B. in March, May, and July, 2009. Respondent records P.B.'s weight, blood pressure and pulse being taken, and that P.B. reported no side effects or complaints. The medications circled are the same as had been prescribed prior to the January 2009 visit. There is no mention or follow up regarding the problem with urine flow, or the recommended visit with a urologist.

- Respondent testified that his practice is almost exclusively bariatric / weight loss
   and that he did not hold himself out to his patients as being a primary care physician.
- 6. On June 23 and again on July 1, 2009, P.B. saw a nurse practitioner for a routine physical examination. The nurse practitioner had no connection with Respondent's practice. The nurse practitioner took a detailed medical and social history of P.B., noting prior urological problems. On physical examination, the nurse practitioner found that P.B.'s prostrate had an uneven surface and the midline was not detectable. His PSA was noted to be 28.7; normal is less than 4.1.
- 7. The nurse practitioner referred P.B. to a urologist. P.B. was found to have a cancerous tumor in all aspects of his prostate and required a radical prostatectomy in September 2009.
- 8. Respondent failed to meet the standard of care in that he himself did not conduct the physical examination and clinical laboratory studies required to establish the patient's overall level of health, nor did he require that these be done by the patient's primary care physician and reported to him periodically while he monitored the patient's weight loss program.
- 9. Respondent failed to meet the standard of care in that he did not recognize that decreased urine flow in a patient of P.B.'s age and gender was more likely to indicate prostate problems than be a side effect of a diet medication, nor did he inquire or follow up on that complaint in subsequent visits.

### CONCLUSIONS OF LAW

 The conduct described above is a violation of unprofessional conduct pursuant to A.R.S. § 32-1854(6), which states "Engaging in the practice of medicine in a manner that harms or may harm a patient or that the board determines falls below the community standard." 2. The conduct described above is a violation of unprofessional conduct pursuant to A.R.S. § 32-1854(38), which states "Any conduct or practice that endangers a patient's or the public's health or may reasonably be expected to do so."

### <u>ORDER</u>

IT IS HEREBY ORDERED that Gary Knighton, D.O, holder of osteopathic medical license number 3116, is issued a DECREE OF CENSURE.

IT IS FURTHER ORDERED that Gary Knighton, D.O, holder of osteopathic medical license number 3116, complete twenty (20) hours of continuing medical education (CME) on the topics of bariatric standards of care and medical record keeping. This CME is to be approved by the Executive Director in advance of beginning the activity, and is to be completed within six (6) months of the effective date of this Order.

# NOTICE OF RIGHT TO REQUEST REVIEW OR REHEARING

Respondent has the right to request a rehearing or review of this matter pursuant to A.R.S. § 41-1092.09. The motion for rehearing or review must be filed with the Arizona Board of Osteopathic Examiners within thirty (30) days. If Respondent files a motion for review or rehearing, that motion must be based on at least one of the eight grounds for review or rehearing that are allowed under A.A.C. R4-22-106(D). Failure to file a motion for rehearing or review within 30 days has the effect of prohibiting Respondent from seeking judicial review of the Board's decision. Service of this order is effective five (5) days after date of mailing. A.R.S. § 41-1092.09(C). If a motion for rehearing or review is not filed, the Board's Order becomes effective thirty-five (35) days after it is mailed to Respondent.



ARIZONA BOARD OF OSTEOPATHIC EXAMINERS IN MEDICINE AN SURGERY

By: Klaine LeTarte, Executive Director

1 2	Original "Findings of Fact, Conclusions of Law and Order for Decree of Censure and Continuing Medical Education" is filed this
3	Arizona Board of Osteopathic Examiners in Medicine and Surgery 9535 East Doubletree Ranch Road
4	Scottsdale AZ 85258-5539
5	Copies of this "Findings of Fact, Conclusions of Law and Order for Decree of Censure and Continuing Medical Education" sent this day of October, 2010 to:
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7	Gary Knighton, D.O. Address of Record
8	Robert Milligan, Esq
9	Milligan Lawless Taylor Murphy & Bailey 4647 North 32 <sup>nd</sup> Street, Ste 185
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